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PROVISIONAL APPLICATION FOR PATENT COVER SHEET

This is a request for filing a PROVISIONAL APPLICATION FOR PATENT under 37 CFR 1.53(c).

Express Mail Label No.

INVENTOR(S)					
Given Name (first and middle (if any)) <u>Janet Gail</u>	Family Name or Surname <u>Prevatt</u>	Residence (City and either State or Foreign Country) <u>Houston, TX</u>			
Additional inventors are being named on the <u>2nd</u> separately numbered sheets attached hereto					
TITLE OF THE INVENTION (500 characters max)					
Direct all correspondence to: CORRESPONDENCE ADDRESS					
<input type="checkbox"/> Customer Number: <div style="border: 1px solid black; width: 250px; height: 30px; display: inline-block;"></div>					
OR					
<input checked="" type="checkbox"/> Firm or Individual Name <u>Janet G. Prevatt</u>					
Address <u>4414 Waycross</u>					
Address					
City <u>Houston</u>		State <u>TX</u>		Zip <u>77035</u>	
Country <u>USA</u>		Telephone <u>(713) 294-2031</u>		Fax <u>2031</u>	
ENCLOSED APPLICATION PARTS (check all that apply)					
<input checked="" type="checkbox"/> Specification Number of Pages <u>4</u>					
<input type="checkbox"/> Drawing(s) Number of Sheets <u>0</u>					
<input checked="" type="checkbox"/> Application Date Sheet. See 37 CFR 1.76					
<input type="checkbox"/> CD(s), Number _____					
<input type="checkbox"/> Other (specify) _____					
METHOD OF PAYMENT OF FILING FEES FOR THIS PROVISIONAL APPLICATION FOR PATENT					
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.					
<input checked="" type="checkbox"/> A check or money order is enclosed to cover the filing fees.					
<input type="checkbox"/> The Director is hereby authorized to charge filing fees or credit any overpayment to Deposit Account Number: _____					
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<div style="border: 1px solid black; width: 100px; height: 50px; display: inline-block;"></div>					
The invention was made by an agency of the United States Government or under a contract with an agency of the United States Government.					
<input checked="" type="checkbox"/> No.					
<input type="checkbox"/> Yes, the name of the U.S. Government agency and the Government contract number are: _____					

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Respectfully submitted,

SIGNATURE

TYPED or PRINTED NAME

TELEPHONE

Date

REGISTRATION NO.

(if appropriate)

Docket Number:

USE ONLY FOR FILING A PROVISIONAL APPLICATION FOR PATENT

This collection of information is required by 37 CFR 1.51. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 8 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Provisional Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/16 (08-03)

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